UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Section

JEC Z B ZUUB

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6) AND/OR**

TEMPORARY FORM D

expires:	verage burden
hours per r	esponse4.00

OMB APPROVAL

OMB NUMBER:

Washington, อะหาเรอRM LIMITED OFFERING EXEMPTION
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		STEEL CO ESTESIO		
Name of Offering (check if this is a	n amendment and name has change	d, and indicate chang	ge.)	
Offer and Sale of Notes and Warrants.				
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505	☑ Rule 506 □	Section 4(6)	ULOE
Type of Filing: New Filing □	Amendment			
	A. BASIC IDENTIF	ICATION DATA		
1. Enter the information requested about t	he issuer		_=	THE RESERVE AND VALUE OF THE PARTY OF THE PA
Name of Issuer (Check if this is an ar	nendment and name has changed, a	ınd indicate change.)		
EPV Solar, Inc.				
Address of Executive Offices	(Number and Street, C	ity, State, Zip Code)	Telephone Nun	THE STATE OF THE SAME AS A SECOND COMMENT OF THE SECONDS
8 Marten Drive, Robbinsville, NJ 08691			609-587-3000	08070904
Address of Principal Business Operations	(Number and Street, C	ity, State, Zip Code)	Telephone Num	
(if different from Executive Offices)	·	•		
			_	
Brief Description of Business	-		DDOO	
A solar energy company that designs, man	ufactures and markets thin-film sili	con solar modules	PROC	ESSED
Type of Business Organization				
	☐ limited partnership, already for	ormed [other (ples A the fif	18 :2009 1 ≶
□ business trust	☐ limited partnership, to be forn	ned	• • • • • • • • • • • • • • • • • • • •	0 2003
		Month Y		חרונדרת
	[1	1 0 9		REUTERS
Actual or Estimated Date of Incorporation			■ Actual	□ Estimated
Jurisdiction of Incorporation or Organizat			or State:	(C)
	CN for Canada; FN for other	foreign jurisdiction)		
			<u> </u>	<u> </u>
GENERAL INSTRUCTIONS				
Note: This is a special Temporary Form I) (17 CFR 239.500T) that is availab	ole to be filed instead	of Form D (17 CFR	239,500) only to issuers that file
with the Commission a notice on Tempora	ary Form D (17 CFR 239.500T) or a	an amendment to suc	h a notice in paper fo	rmat on or after September 15,
2008 but before March 16, 2009. During				

does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of §230.503T.

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(cs) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)		_		
Frederick A. Voight					
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
e/o EPV Solar, Inc., 8 Marlen Dri	ve, Robbinsville, N	IJ 08691			
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				ividinaging i artifer
Eric Ryan					
Business or Residence Address	(Numb	er and Street, City, State, Z	ip Code)		
c/o EPV Solar, Inc., 8 Marlen Dri	ve, Robbinsville, N	U 08691			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	_			
Christofer Dittmar					
Business or Residence Address	(Numb	er and Street, City, State, Z	Lip Code)		
c/o EPV Solar, Inc., 8 Marlen Dri	ive, Robbinsville, N	NJ 08691			
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Marcus Rist					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
c/o EPV Solar, Inc., 8 Mailen Dri	ive, Robbinsville, l	vJ 08691		_	
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
T.J. Glauthier					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
e/o EPV Solar, Inc., 8 Marlen Dr	ive, Robbinsville, 1	NJ 08691			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	■ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Scott Massie					
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
c/o EPV Solar, Inc., 8 Marlen Dr	ive, Robbinsville, I	NJ 08691			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)	<u> </u>	<u></u>		
Howard Brodic					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
c/o EPV Solar, Inc., 8 Marlen Dr	ive. Robbinsville, l	NJ 08691			

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
Full Name (Last name first, if ind	lividual)				Managing Partner
	,				
Edward Stern Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
			,		
c/o EPV Solar, Inc., 8 Marlen Dri Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if ind	lividual)				
Elizabeth McCarthy	_			_	
Business or Residence Address	(Numbe	er and Street, City, State, Z	lip Code)		
c/o EPV Solar, Inc., 8 Marien Dri	ive, Robbinsville, N	IJ 08691			
Check Box(es) that Apply:	□ Promoter	□ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)			<u> </u>	
Thomas Werthan					
Business or Residence Address	(Numbe	er and Street, City, State, Z	Lip Code)		
c/o EPV Solar, Inc., 8 Mailen Dri	ive Robbinsville N	JI 08691			
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
					Managing Partner
Full Name (Last name first, if ind	lividual)				
Raymond Guba					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
c/o EPV Solar, Inc., 8 Marten Dr	ive, Robbinsvill <u>e, N</u>				
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Robert Bryan					
Business or Residence Address	(Numbe	er and Street, City, State, 2	(ip Code)		
a/a CDV Salaa Ina 9 Maalaa Da	ina Dahhinsuilla N	11 00001			
c/o EPV Solar, Inc., 8 Marlen Dr Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or
			_		Managing Partner
Full Name (Last name first, if inc	lividual)				
Reynolds E. Jenkins					
Business or Residence Address	(Numbe	er and Street, City, State, 2	(ip Code)		
c/o EPV Solar, Inc., 8 Marlen Dr	ive, Robbinsville, N	NJ 08691			
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)			<u> </u>	
Energy Innovations Portfolio AG	& Co. KGA				
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
P.O. Box 120155, 68161 Mannho	im, Germany				

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years:
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Integrated Electrical Services, In-	c.				
Business or Residence Address		er and Street, City, State, Z	ip Code)		
1800 West Loop, Suite 500, Hous	ston. TX 77027				
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)		-		
F.A. Voight & Associates L.P.					
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		<u> </u>
11 Rivercoach Lane, Sugarland,	I'X 77479				
Cheek Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				<u></u>
Jack Investments Co. Ltd.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
JIPFA Bldg 3rd Fl. Main Street,	P.O. Box 181 Road	Town, Tortola, British Vi	rgin Islands		
Cheek Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				Managing Faither
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				<u>68 . m</u>
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				<u> </u>
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Business or Residence Address	(Numb	er and Street, City, State, 7	Lip Code)		<u> </u>
Apprison of the same 11001033	(,,,,,,,,,		,,		

				B. INFO	ORMATIO	N ABOUT	OFFERD	<u>vg</u>		_		NI-
1. Has the iss	uer sold, or	does the is	suer intend	to sell, to n	on accredit	ed investor	s in this off	ering?				No ⊠
			Ansv	wer also in	Appendix, (Column 2, i	f filing und	ler ULOE.				
2. What is the	minimum	investment	that will be	accented (from any ind	dividual?					\$ n/a	
2 ,											Yes	No
3. Does the o	ffering pen	mit joint ow	nership of	a single uni	t?		1+17174+11+17		·····		8	
4. Enter the in remuneration agent of a bropersons to be	for solicitat ker or deale listed are as	tion of purc er registered ssociated pe	hasers in co d with he S crsons of su	nnection w EC and/or	ith sales of with a state	securities i or states, li	n the offeri st the name	ng. If a per of the brok	son to be li: er or deale:	sted is an a	associated than five	d person or
Full Name (La		•	dual)									
Wharton Capi												
Business or R	esidence A	ddress (Nu	mber and St	reet, City,	State, Zip C	(ode)						
444 Madison								_				
Name of Asso	ciated Bro	ker or Deal	er									
Wharton Capi	tal Partners	s Lid										
States in Whit						hasers				F2	- ı All State	ne.
(Check "/	All States (or check ind [AZ]	JIVIJUBI SUB [AR]	nes) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	 [GA]	All State H1]	.s [ID]
[IL]	[NI]	[[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[נאן	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	(SC)	[SD]	INI	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	lode)						
Name of Asso	ciated Bro	ker or Deal	er									
States in Whi									_		All State	
(Check "A	All States [AK]	AZ	aividuai Sta [AR]	ites) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	(ID)
[IL]	[IN]	[/M2] [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	(MS)	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	INYI	INCI	IND]	[011]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L			<u> </u>									
		•	ŕ									
Business or R	esidence A	ddress (No	mher and S	treet City	State. Zin C	Code)						
Dusiness of it	esidence /1	1001033 (110	moe, and a	, 011,		,,						
Name of Asse	ociated Bro	ker or Deal	ler						_			
States in Whi	ch Person I	Listed Has ! or check in	Solicited or	Intends to	Solicit Purc	hasers					All State	
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[di]
[IL]	[1N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MO]
[MT]	[NE]	ĮNVĮ	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(R1)	ISCI	1901	(TNI	ITX1	IUTI	IVTI	IVAI	fWA1	fWVI	tWil	(WY)	[PR]

Wharton Capital Partners Ltd was engaged by the Company as a placement agent, but did not receive any remuneration in connection with the purchasers who purchased Notes and Warrants in this offering, since such purchasers are existing holders who were not located by Wharton Capital Partners Ltd.

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$ <u>0</u>
Equity	\$	\$ <u>0</u>
□ Common □ Preferred		
Convertible Securities (including warrants)	\$4,800,000.00	\$4,800,000.00
Partnership Interests	\$	
Other (Specify)		\$
Total	\$4,800,000.00	\$4,800,000.00
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
Accredited Investors		\$ <u>4,800,000.00</u>
Non-accredited Investors		\$ <u>0</u>
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[3 \$
Printing and Engraving Costs		\$
Legal Fees (estimated)		3 \$ <u>70,000.00</u>
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify) Blue Sky (estimated)		3 \$ <u>500</u>
Total		3 \$70,500.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	SES AND USE OF I	PROCEEDS		
b. Einter the difference between the aggregate offering price given in response to Part C. and total expenses furnished in response to Part C. Question 4.a. This difference "adjusted gross proceeds to the issuer"	is the		s.4 <u>,129</u> ,5	00.
Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not known, furn estimate and check the box to the left of the estimate. The total of the payments listed the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.6 a	ish an must equal		·	
		Payments to Officers, Directors, & Affiliates	Payments To Others	
Salaries and fees		s	D 2	
Purchase of real estate		S	o s	
Purchase, rental or leasing and installation of machinery and equipment		\$	□ S	
Construction or leasing of plant buildings and facilities		s	□ S	
Acquisition of other businesses (including the value of securates involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).		s	D \$	
Repayment of indebtedness			_ S	
Working Capital			× 54,729,50	ao
Other (specify):			- \$	
		•	_ S _	
Column Totals			m s 4,729,5	500.
Total Payments Listed (Column totals added)		E C \$_	4,729,500.00	υ
D, FEDERAL SIGNATURE	_			
The issuer has duly caused this notice to be signed by the undersigned duly authorized per- following signature constitutes an undertaking by the issuer to furnish to the U.S. Secur				
of its staff, the information furnished by the issuer to any non-accredited investor pursus	ant to paragraph (b)(2) of Rule 502.		
isuer (Print or Type) Signature	<u>—</u>	Date		
EPV Solar Inc. The	-	N .	10 20	20
1-out / roll		vecem	ber 18, 20	UX
ame of Signer (Print or Type) Title of Signer (Print or Type)	-			
Howard Brodie Vice President				
TUMEN - / - IE YICE resident				

——— ATTENTION ——————————

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

